

**STATE OF CONNECTICUT  
DEPARTMENT OF PUBLIC HEALTH  
BUREAU OF REGULATORY SERVICES**

In re: Robert M. Lambert

Petition No. 97III-010-022

**PRELICENSURE CONSENT ORDER**

WHEREAS, Robert M. Lambert of Monogahela, Pennsylvania (hereinafter "respondent") has applied for licensure to practice as a registered nurse to the Department of Public Health (hereinafter "the Department") pursuant to Chapter 378 of the General Statutes of Connecticut, as amended; and,

WHEREAS, respondent admits that:

1. The Department has at no time issued respondent a license to practice as a nurse under the General Statutes of Connecticut, Chapter 378.
2. On November 8, 1996, a notation of resident abuse was placed on the Pennsylvania Nurse Aide Registry, after a finding that respondent restrained a resident by placing a knee on the resident's chest.
3. The conduct described above constitutes grounds for the denial of respondent's application for licensure pursuant to §19a-14 of the General Statutes of Connecticut.

NOW THEREFORE, pursuant to §19a-14(a)(6) of the General Statutes of Connecticut, respondent hereby stipulates and agrees to the following:

1. Respondent waives the right to a hearing on the merits of his application for licensure.

2. After satisfying the requirements for licensure as a registered nurse as set forth in Chapter 378 of the General Statutes of Connecticut, respondent's license to practice nursing will be issued.
3. Respondent's license to practice as a registered nurse in the State of Connecticut shall, immediately upon issuance, be placed on probation for three (3) years under the following terms and conditions:
  - a) Respondent shall not render services or provide care to individuals diagnosed with dementia at any time during the period of his probation.
  - b) Respondent shall not be a charge nurse or the sole registered nurse on a particular floor of a facility during the period of his probation.
  - c) Respondent shall not accept employment in any capacity for a personnel provider, visiting nurse agency or home health care agency, and shall not be self employed as a nurse for the period of his probation.
  - d) Respondent shall provide a copy of this Consent Order to all current and future employers for the duration of his probation.
  - e) Respondent shall be responsible for the provision of monthly written reports directly to the Department from his nursing supervisor (i.e., Director of Nursing) for the first year of his probation and bimonthly for the remaining period of his probation. Employer reports shall include documentation of respondent's ability to safely and competently practice nursing. Reports are due on the tenth business day of the month. The first monthly report required by the terms of this Prelicensure Consent Order is due on the tenth day of the first full month after the effective date of this Prelicensure Consent Order.

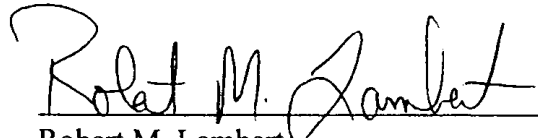
- f) Respondent shall notify the Department of any change of employment within fifteen (15) days of such change.
  - g) Respondent shall notify the Department of any change in his home or business address within fifteen (15) days of such change.
- 4. Respondent shall provide written notice to the Department in the event respondent is unemployed as a registered nurse for periods of thirty (30) consecutive days or longer, or is employed as a registered nurse less than twenty (20) hours per week, or is employed outside the State of Connecticut. Such period(s) shall not be counted in reducing the probationary period covered by this Prelicensure Consent Order.
  - 5. Respondent shall comply with all state and federal statutes and regulations applicable to his license.
  - 6. Any deviation from the term(s) of this Prelicensure Consent Order without prior written approval of the Department shall constitute a violation. A violation of any term(s) of this Prelicensure Consent Order shall result in the right of the Department in its discretion to immediately deem respondent's registered nurse license rescinded. Any extension of time or grace period for reporting granted by the Department shall not be a waiver or preclude the Department's right to take action at a later time. The Department shall not be required to grant future extensions of time or grace periods. Notice of the rescission of the license shall be sent by the Department to respondent's address of record. Respondent waives any right to a hearing on the issue of violation of the terms of this Prelicensure Consent Order.
  - 7. That correspondence and reports required by the terms of this Prelicensure Consent Order are to be addressed to:

Bonnie Pinkerton, Nurse Consultant  
Department of Public Health  
Division of Health Systems Regulations  
410 Capitol Avenue, MS #12HSR  
P.O. Box 340308  
Hartford, Connecticut 06134-0308

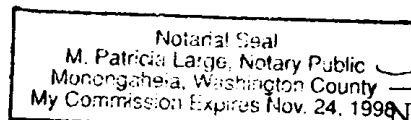
8. Legal notice shall be sufficient if sent to respondent's last known address of record reported to the Licensure and Registration Section of the Division of Health Systems Regulation of the Department.
9. Respondent understands that this Prelicensure Consent Order may be considered as evidence of the above-admitted violations in any proceeding before the Connecticut Board of Examiners for Nursing in which (1) his compliance with this Prelicensure Consent Order is at issue, or (2) his compliance with §20-99 of the Connecticut General Statutes, as amended, is at issue.
10. This Prelicensure Consent Order and terms set forth herein are not subject to reconsideration, collateral attack or judicial review under any form or in any forum. Further, this Prelicensure Consent Order is not subject to appeal or review under the provisions of Chapters 54 and 368a of the General Statutes of Connecticut, provided that this stipulation shall not deprive respondent of any other rights that he may have under the laws of the State of Connecticut or of the United States.
11. Respondent hereby acknowledges and agrees that he is forever prohibited from employment in a nursing facility, as defined in Connecticut General Statutes Section 19a-490(c) due to the adverse finding of nurse aide abuse which has been entered onto the Nurse Aide Registry in the State of Pennsylvania.

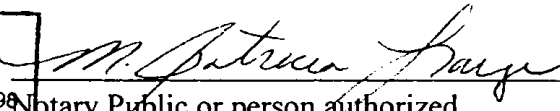
12. This Prelicensure Consent Order is a revocable offer of settlement which may be modified by mutual agreement or withdrawn by the Department at any time prior to its being executed by the last signatory.
13. This Prelicensure Consent Order is effective when accepted and approved by a duly appointed agent of the Department.
14. Respondent understands this Prelicensure Consent Order is a matter of public record.
15. Respondent understands he has the right to consult with an attorney prior to signing this Prelicensure Consent Order.

I, Robert M. Lambert have read the above Prelicensure Consent Order, and I agree to the terms and allegations set forth therein. I further declare the execution of this Prelicensure Consent Order to be my free act and deed.

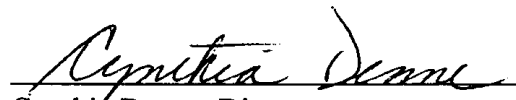
  
Robert M. Lambert

Subscribed and sworn to before me this 15 day of Oct 1997.



  
Notary Public or person authorized  
by law to administer an oath or  
affirmation

The above Prelicensure Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Public Health on the 16<sup>th</sup> day of October 1997, it is hereby ordered and accepted.

  
Cynthia Denne, Director  
Division of Health Systems Regulation